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8 **BEFORE THE**
9 **BOARD OF REGISTERED NURSING**
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the Accusation Against:
13 MA EVITA C. SAN JOSE, a.k.a.
14 MARIA EVITA TAN CONJARES SAN JOSE
15 193 Cottage Grove Ave.
16 Camarillo, CA 93010
17 Registered Nurse License No. 361204
18 Respondent.

Case No. 2007 - 157

ACCUSATION

19 Complainant alleges:

PARTIES

- 20 1. Ruth Ann Terry, M.P.H., R.N. (Complainant) brings this Accusation
21 solely in her official capacity as the Executive Officer of the Board of Registered Nursing
22 (Board), Department of Consumer Affairs.
- 23 2. On or about August 31, 1983, the Board issued Registered Nurse License
24 No. 361204 to Ma Evita C. San Jose, a.k.a. Maria Evita Tan Conjares San Jose (Respondent).
25 The Registered Nurse License was in full force and effect at all times relevant to the charges
26 brought herein and will expire on July 31, 2007, unless renewed.

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1 8. California Code of Regulations, title 16, section 1443, states:

2 "As used in Section 2761 of the code, 'incompetence' means the lack of possession
3 of or the failure to exercise that degree of learning, skill, care and experience ordinarily possessed
4 and exercised by a competent registered nurse as described in Section 1443.5."

5 9. California Code of Regulations, title 16, section 1443.5 states:

6 "A registered nurse shall be considered to be competent when he/she consistently
7 demonstrates the ability to transfer scientific knowledge from social, biological and physical
8 sciences in applying the nursing process, as follows:

9 (1) Formulates a nursing diagnosis through observation of the client's physical
10 condition and behavior, and through interpretation of information obtained from the client and
11 others, including the health team.

12 (2) Formulates a care plan, in collaboration with the client, which ensures that
13 direct and indirect nursing care services provide for the client's safety, comfort, hygiene, and
14 protection, and for disease prevention and restorative measures.

15 (3) Performs skills essential to the kind of nursing action to be taken, explains the
16 health treatment to the client and family and teaches the client and family how to care for the
17 client's health needs.

18 (4) Delegates tasks to subordinates based on the legal scopes of practice of the
19 subordinates and on the preparation and capability needed in the tasks to be delegated, and
20 effectively supervises nursing care being given by subordinates.

21 (5) Evaluates the effectiveness of the care plan through observation of the client's
22 physical condition and behavior, signs and symptoms of illness, and reactions to treatment and
23 through communication with the client and health team members, and modifies the plan as
24 needed.

25 (6) Acts as the client's advocate, as circumstances require, by initiating action to
26 improve health care or to change decisions or activities which are against the interests or wishes
27 of the client, and by giving the client the opportunity to make informed decisions about health
28 care before it is provided."

10. Section 125.3 of the Code provides, in pertinent part, that the Board may request the administrative law judge to direct a licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case.

FIRST CAUSE FOR DISCIPLINE

(Incompetence or Gross Negligence)

11. Respondent is subject to disciplinary action under section 2761, subdivision (a)(1) of the Code on the grounds of unprofessional conduct, in that Respondent was grossly negligent and/or incompetent, within the meaning of California Code of Regulations, title 16, section 1442, as defined in California Code of Regulations, title 16, section 1443.5, in that while on duty as a registered nurse at Ventura County Medical Center (VCMC) in Ventura, California, Respondent committed acts of incompetence and/or gross negligence.

The circumstances are that on or about September 13, 2003, Respondent was employed by Haemo-Stat Inc., which contracts to provide a mobile dialysis unit to VCMC. On this same date, Respondent was on duty at VCMC and was simultaneously caring for two dialysis patients located in the same room. In addition to receiving dialysis, patient L.R. was also to receive a blood transfusion. Instead of giving the blood transfusion to patient L.R., Respondent gave the blood transfusion to patient J.V. Patient J.V.'s blood type is "A" positive, whereas patient L.R.'s blood type is "O" positive. As a result, patient J.V.'s condition became critical and he had to be treated in the intensive care unit. In the course of administering a blood transfusion to the wrong patient, Respondent committed numerous other related acts of incompetence and/or gross negligence, as follows:

a. Respondent was grossly negligent and incompetent in that she administered a blood transfusion to the wrong patient.

b. Respondent was grossly negligent in that she failed to check the patient's chart for physician orders to administer a blood transfusion. There were no physician orders for a blood transfusion for patient J.V.

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1 c. Respondent was incompetent in that she failed to have a secondary
2 identification verification conducted by a second licensed nurse, as required by VCMC's
3 protocol, prior to administering the blood transfusion to patient J.V.

4 d. Respondent was incompetent in that she failed to observe that patient J.V.
5 was not wearing a red blood wristband, which would indicate that there were no physician's
6 orders that patient J.V. receive a blood transfusion.

7 e. Respondent was grossly negligent in that she failed to match the blood
8 bank number with the patient's red blood wristband.

9 f. Respondent was grossly negligent in that she failed to obtain a signed
10 "Agreement for Blood Transfusion" from patient J.V., and after the blood transfusion, forged a
11 signed "Agreement for Blood Transfusion" form.

12 g. Respondent was grossly negligent in that she failed to check patient J.V.'s
13 chart prior to administering the blood transfusion.

14 h. Respondent was incompetent in that she failed to assemble all the
15 equipment prior to requesting blood from the blood bank. Respondent ordered and obtained the
16 blood and then had to wait for blood tubing to arrive before she could hang the blood for the
17 transfusion.

18 i. Respondent was incompetent in that she followed her own procedures in
19 conducting the blood transfusion, instead of following VCMC's established protocol.

20 j. Respondent was grossly negligent in that she failed to properly record the
21 period of time that patient J.V. was receiving the blood transfusion.

22 **SECOND CAUSE FOR DISCIPLINE**

23 (Unprofessional Conduct - Falsification of Record)

24 12. Respondent is subject to disciplinary action under section 2761,
25 subdivision (a) of the Code on the grounds of unprofessional conduct, in that on or about
26 September 13, 2003, Respondent falsified an "Agreement for Blood Transfusion" form for
27 patient J.V. as more fully set forth in paragraph 12, subdivision f., above.

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1 **PRAYER**


2 WHEREFORE, Complainant requests that a hearing be held on the matters herein
3 alleged, and that following the hearing, the Board of Registered Nursing issue a decision:

4 1. Revoking or suspending Registered Nurse License No. 361204, issued to
5 Ma Evita C. San Jose, a.k.a. Maria Evita Tan Conjares San Jose.

6 2. Ordering Maria Evita Tan Conjares San Jose to pay the Board of
7 Registered Nursing the reasonable costs of the investigation and enforcement of this case,
8 pursuant to Business and Professions Code section 125.3;

9 3. Taking such other and further action as deemed necessary and proper.
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11 DATED: 12/8/06

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15 RUTH ANN TERRY, M.P.H., R.N.
16 Executive Officer
17 Board of Registered Nursing
18 Department of Consumer Affairs
19 State of California
20 Complainant
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